



October 4, 2017

AUTOPSY REPORT

PATHOLOGIC EXAMINATION ON THE BODY OF



FINAL DIAGNOSES

1. Penetrating gunshot wound to the right chest

OPINION:

It is my opinion that death was caused by gunshot wound to the right chest sustained during mass fatality incident.

PENETRATING GUNSHOT WOUND TO THE RIGHT CHEST:

There was an entrance gunshot wound on the right upper chest. There was no evidence of close range of firing noted on the skin surrounding this wound. The wound track proceeded from this injury through the soft tissue, right clavicle at the sternal end, branches of the arch of the aorta, left lung, posterior left fourth rib, and soft tissue of the left upper back where a jacketed bullet was recovered. Associated injuries included soft tissue hemorrhage, of the chest and anterior neck, hemorrhage along the wound path, and left hemothorax. The wound track was from front to back, right to left and downward when the body is viewed in the standard anatomical position.

Postmortem toxicology report revealed blood alcohol concentration (BAC) of 0.232 g/100mL.

CAUSE OF DEATH: Gunshot wound to the right chest

Leonardo Roquero, M.D. Medical Examiner LR/amu/ag

MANNER: HOMICIDE

DATE: 12/20/2013



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POSTMORTEM EXAMINATION ON THE BODY OF



Date of Pronounced Death: October 2, 2017
Date of Postmortem Examination: October 4, 2017

EXTERNAL EXAMINATION:

The body was received sealed with a seal number with the identification tag. The body was that of a normally developed and nourished, , male, appearing about the recorded age of years. The body measured 73 inches in length and weighed 205 pounds. Rigor mortis had passed. Livor mortis was present posteriorly and fixed. Clothing consisted of shirt, underwear, socks and tennis shoes. The head normocephalic and the scalp hair was brown with white and gray streaks. The eyes had white sclerae, pale conjunctivae, and blue The dentition was natural. No lesions of the oral irides. mucosa were identified. There were no masses discernable in the neck and the larynx was in the midline. The abdomen was rounded. The external genitalia were those of a normal adult circumcised The back showed no significant deformities or other There was a healing abrasion on the back of the abnormalities. left hand located in between the second and third knuckles. There was a plastic bracelet around the right wrist.

EVIDENCE OF TREATMENT: None

EVIDENCE OF INJURY:

PENETRATING GUNSHOT WOUND TO THE RIGHT CHEST:

There was a 0.7 cm \times 0.4 cm entrance gunshot wound on the chest, 10-1/2 inches below the top of the head and 1-1/2 inches right of the anterior midline. There was no soot or gunpowder stippling noted on the skin surrounding this wound. The wound track proceeded from this injury through the soft tissue, right clavicle at the sternal end, brachiocephalic artery, left common



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carotid artery and left subclavian artery of the arch of the aorta, left upper lobe of the lung, posterior left fourth rib, and soft tissue of the left upper back, anterior to the scapula, where a jacketed bullet was recovered. Associated injuries included soft tissue hemorrhage, of the chest and anterior neck, hemorrhage along the wound path, and left hemothorax of approximately 1200 mL. The wound track was from front to back, right to left and downward when the body is viewed in the standard anatomical position.

INTERNAL EXAMINATION:

ORGAN WEIGHTS (in grams):

Heart:	490
Right Lung:	450
Left Lung:	470
Liver:	1990
Spleen:	150
Right Kidney:	140
Left Kidney:	140

An autopsy was performed utilizing the normal thoraco-abdominal incision. The viscera were in their normal anatomical positions. Except for the above previously described injuries, the internal systems were as follows:

Neck:

No abnormality was noted in the hyoid bone, laryngeal cartilages, trachea, or the cervical vertebral column.

Cardiovascular System:

The 490 gm enlarged heart had a normal configuration with an unremarkable epicardial surface and a moderate amount of epicardial fat. The coronary arteries had no significant atherosclerotic disease. No acute thrombi were present. The left ventricle, septum and right ventricular wall measured 1.5 cm, 1.5 cm and 0.3 in thickness, respectively. The papillary



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muscles and left ventricular free wall had endomyocardial fibroses. The chordae tendineae were thickened. The valves were unremarkable. The aorta had no significant atherosclerosis. The major arteries and great veins showed normal distribution.

Respiratory System:

The larynx and trachea were unremarkable. The right and left lungs weighed 450 gm and 470 gm, respectively. There was congestion in the parenchyma. No pulmonary emboli were identified.

Hepatobiliary System:

The 1990 gm liver had firm dark tan surfaces and red-tan parenchyma. The gallbladder and biliary tracts were unremarkable.

Hemolymphatics:

The 150 gm spleen had smooth surfaces and dark purple firm pulp. There was no significant lymphadenopathy.

Alimentary System:

The tongue, esophagus, stomach, small bowel, appendix and colon were unremarkable. The lining of the stomach had an intact and unremarkable rugal pattern and the contents of the stomach consisted of approximately 200 mL of partially digested foods.

Pancreas:

The pancreas showed an unremarkable tan lobulated pattern.

Endocrine System:

The thyroid gland had a normal bilobed configuration. The adrenal glands were each unremarkable with golden-yellow cortices.

Genitourinary System:

The right and left kidneys weighed 140 gm and 140 gm, respectively. Each kidney had smooth cortical surfaces, normal



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cortico-medullary regions and no changes in the calyceal systems, pelves, ureters, or bladder.

Musculoskeletal System:

Except for the above noted injuries, all the muscles and axial skeleton were free of any significant abnormalities.

RADIOGRAPHS:

Anterior postmortem radiographs together encompassing the head, torso and extremities were taken and findings were included in the evidence of injury.